

Work Order ID 119829

Tuesday, May 27, 2014 7:57:19 AM

119829

Page 1

Item ID: D3996-FE-832-EF

Accept

N900040100Setup Start ***NS1***

Revision ID:

Stop ***NS2***

Item Name: Self-Clinching Fastener

Start Date: 6/6/2014 Start Qty: 300.00

300

Cust Item ID:

Required Date: 6/6/2014 Req'd Qty: 300.00

300

Customer:

Reference:

Approvals:

Process Plan:

*Co*Date: *14/05/27*

Tooling:

Date:

Run Start ***NR1***

QC:

Date:

SPC (Y/N):

Date:

Stop ***NR2***Sequence ID/
Work Center IDOperation
DescriptionSet Up/
Run Hours

Tool ID

Tool #

Plan
CodeAccept
QtyReject
QtyReject
NumberInsp.
Stamp

Draw Nbr

Revision Nbr

D3996

A

100

0.00

100

Purchasing

Memo

0.00

Purchasing

Issue P/O:

24366

Purchase Part Number: FE-832-EF

Supplier: Interfast Inc.

Certificate of conformity is required

Co 14/05/27 300

110

Receive & Inspect for Damage & Mat'l Certs

0.00

110

Packaging

Memo

0.00

Packaging

300 x 50 14-5-29

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order update only ☐

Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width:100%; border: none;"> <tr> <td style="width:25%;">Skid-tube <input type="checkbox"/></td> <td style="width:25%;">Crosstube <input type="checkbox"/></td> <td style="width:25%;">Water Jet <input type="checkbox"/></td> <td style="width:25%;">Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

FAULT CATEGORY

Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other _____ _____ _____
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Work Order ID 119829

Tuesday, May 27, 2014 7:57:20 AM

119829

Page 2

Item ID: D3996-FE-832-EF

Accept

N900040100

Setup Start

NS1

Revision ID:

Item Name: Self-Clinching Fastener

Stop

NS2

Start Date: 6/6/2014 Start Qty: 300.00

300

Cust Item ID:

Required Date: 6/6/2014 Req'd Qty: 300.00

300

Customer:

Reference:

Approvals:

Process Plan: _____

Date: _____

Tooling: _____

Date: _____

Run Start

NR1

QC: _____

Date: _____

SPC (Y/N): _____

Date: _____

Stop

NR2Sequence ID/
Work Center IDOperation
DescriptionSet Up/
Run Hours

Tool ID

Tool #

Plan
CodeAccept
QtyReject
QtyReject
NumberInsp.
Stamp

120

QC6- Inspect dimensions to drawing

0.00

120

QC

Memo

0.00

Quality Control

300

130

Identify as per dwg & Stock Location: GA

0.00

130

Packaging

Memo

0.00

Packaging

300X

DAS
28
9-89

MAY 30 2014

140

QC21- Final Inspection - Work Order Release

0.00

140

QC

Memo

0.00

Quality Control

ML5 1406-02

W462530

Tuesday, May 27, 2014 7:57:19 AM

Page 1

1 19829

D3996-FF-832-FF

Required Date: 6/6/2014

Required Qty: 300.00

Comments: IPP RevA: new issue 09.11.11 DD verified by:EC

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
FE-832-EF		Purchased	No			110	Each	0.0000	1	300			
FF-832-FF									**	300	SP 14-5-29		
PEM Insert													

DQA: _____ Date: _____



WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order update only ☐

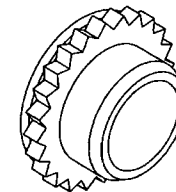
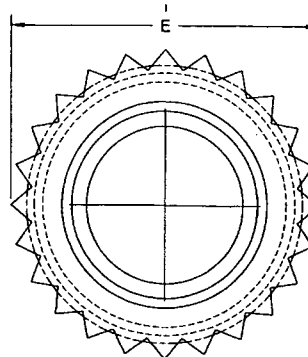
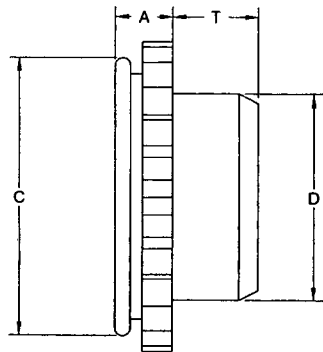
Work Order: _____ Part No. _____ NCR No. _____	DISPOSITION Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	AGAINST DEPARTMENT/PROCESS <table style="width:100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
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FAULT CATEGORY

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SPECIFICATION CONTROL DRAWING



D3996-XXX-YYY-ZZZ SELF-CLINCHING FASTENER

THREAD SIZE	THREAD CODE ("YYY")	TYPE ("XXX")	A MAX (SHANK)	SHEET THICKNESS	C +0.000 -0.005	D MAX	E ±0.005	T +0.015 -0.000	HOLE SIZE IN SHEET +0.003/-0.000	MIN DIST: HOLE CL TO EDGE	WEIGHT lb
#4-40 (0.112)	440	FEO	0.040	0.039-0.045	0.171	0.145	0.192	0.065	0.172	0.14	0.00031
		FE	0.060	0.059-0.070							0.00037
#6-32 (0.138)	632	FEO	0.040	0.039-0.045	0.212	0.180	0.244	0.075	0.213	0.17	0.00047
		FE	0.060	0.059-0.070							0.00068
#8-32 (0.164)	832	FEO	0.040	0.039-0.045	0.289	0.215	0.322	0.090	0.290	0.20	0.00098
		FE	0.060	0.059-0.070							0.00124
#10-32 (0.190)	032	FEO	0.040	0.039-0.045	0.289	0.245	0.322	0.110	0.290	0.20	0.00104
		FE	0.060	0.059-0.070							0.00120
1/4-28	0428	FE	0.060	0.059-0.070	0.343	0.318	0.384	0.120	0.344	0.28	0.00158

NOTES

1) SPECIFICATION: PENNENGINEERING (PEM) MINIATURE SELF-CLINCHING FASTENER, SELF-LOCKING
PEM P/N XXX-YYY-ZZZ

WHERE "XXX" = TYPE "FEO" (SHORT SHANK) OR "FE" (LONG SHANK) PER TABLE

"YYY" = THREAD CODE PER TABLE

"ZZZ" = FINISH CODE PER NOTE 2 BELOW

FOR EXAMPLE, #8-32 THREAD, LONG SHANK, ELECTRO-FILM FINISH:

DART P/N = D3996-FE-832-EF

PEM P/N = FE-832-EF

2) FINISH: FINISH CODE ("ZZZ") PER THE FOLLOWING:

"C" = CADMIUM YELLOW CHROMATE PER ASTM B766 CLASS 5 TYPE II

"CI" = CADMIUM CLEAR CHROMATE PER ASTM B766 CLASS 5, TYPE III

"EF" = ELECTRO-FILM PER MIL-PRF-46010

"MD" = MOLYBDENUM DISULFIDE DRY FILM (STD PEM FINISH)

3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED

4) UNITS: INCHES UNLESS OTHERWISE NOTED

5) BREAK SHARP EDGES: N/A

6) IDENTIFICATION: N/A

7) WEIGHT: N/A

C214105127

W10:119829

RELEASED
2009-11-08

A	NEW ISSUE	CP	09.10.01
REV.	DESCRIPTION	BY	DATE
DESIGN			
DRAWN			
CHECKED			
MFG. APPR.			
APPROVED			
DE APPR.			
DATE	09.10.01		

DART AEROSPACE LTD
HAWKESBURY, ONTARIO, CANADA

DRAWING NO. **D3996** REV. A
SHEET 1 OF 1

TITLE **SELF-CLINCHING FASTENER** SCALE NTS

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Dart Aerospace Ltd.
1270 Aberdeen Street
Hawkesbury, ON K6A 1K7
Tel: 613 632 9577
Fax: 613 632 1053

PURCHASE ORDER

Purchase Order ID PO24366

Purchase Order Date 5/27/2014
PO Print Date 5/27/2014

Page Number 1 of 2

Order From :

B/E AEROSPACE INC
88289 EXPEDITE WAY
CHICAGO, IL 33172
USA

VU-BEA001

Ship To : DART AEROSPACE LTD

1270 ABERDEEN
HAWKESBURY, ON K6A 1K7
CANADA

FAKED

Contact Name

Vendor Phone 305-925-2600

Ship To Contact

Ship To Phone

Ship Via: FedEx PI collect

Ship Acct:

Buyer

Chantal Lavoie

Customer POID

Customer Tax # 10127-2607

Terms Net 30

Currency USD

FOB FCA - (Free Carrier)

Line Nbr	Reference Vendor Part Number Line Comments Delivery Comments	Description/ Mfg ID	Req Date/ Taxable Promise Date	CD	Req Qty/ Unit of Measure	PO Unit Price	Extend Pri
1	MS17985-C410 316.	Pip Pin T'	5/29/2014 Yes 5/29/2014	FN	10.00 ✓ Each	\$15.00	\$150.0
						Line Total:	\$150.0
2	MS21920-24	Clamp	5/29/2014 Yes 5/29/2014	FN	50.00 ✓ Each	\$11.17	\$558.0
						Line Total:	\$558.0
3	FE-832-EF AS PER DWG D3996 REV. A B119829	PEM Insert	5/29/2014 Yes 5/29/2014		300.00 ✓ Each	\$0.65	\$195.0

SEP 14-5-29

Note:

5/27/2014



B/E Aerospace, Inc.

CONSUMABLES MANAGEMENT

Tel: +1.305.925.2600 • Fax: +1.305.507.7191 • www.beconsumables.com
Remit to Address: 88289 Expedite Way, Chicago, IL 60695-0001
Wire Instructions: B/E Aerospace Consumables Management • JPMorgan Chase Bank New York
ABA: 021000021 • Account: 304639273 • SWIFT: CHASUS33 • CHIP UID: 0002



INVOICE NUMBER

HTN02A

PAGE 1 OF 2

SOLD TO:
002409

DART AEROSPACE LTD
1270 ABERDEEN ST
HAWKESBURY, ON
CANADA K6A 1K7

SHIP TO:

DART AEROSPACE LTD
1270 ABERDEEN ST
HAWKESBURY, ON
CANADA K6A 1K7



ORDER NO.		DATE	SHIP VIA	TERMS		SHIPPING TERMS	
PO24366		05/28/14	FEDX INTL P1 COLL	NET 45		FOB-MIAMI	
ITEM NO.	QUANTITY ORDERED	PART NUMBER AND DESCRIPTION	PRICE	UNIT	BACK ORDER	SHIPPED	AMOUNT
1	10	MS17985C410 PIN ECCN :9A991 Country Origin: USA TARIFF: 7318.16.0060 MFR: AVIBANK MFG. CTRL# : 2014C05649 LOT# : 1402728 LOT QTY: 10 COUNTRY OF ORIGIN: USA Country of Origin: USA	15.000	EA	0	10	150.00
2	50	MS21920-24 CLAMP ECCN :9A991 Country Origin: USA TARIFF: 7318.15.2091 MFR: VOSS INDUSTRIES INC CTRL# : 2014D18032 LOT# : 171849 LOT QTY: 50 COUNTRY OF ORIGIN: USA Country of Origin: USA	11.170	EA	0	50	558.50
3	300	FE-832EF NUT Country Origin: USA TARIFF: 7318.16.0060 MFR: PENN ENG & MFG. CTRL# : 2011K17746 LOT# : 967516 LOT QTY: 300 COUNTRY OF ORIGIN: USA	0.650	EA	0	300	195.00
CONTINUED							
MATERIAL TO BE RETURNED MUST HAVE PRIOR AUTHORIZATION BY B/E AEROSPACE							

ALL ITEMS ARE SUBJECT TO A 100% RESTOCKING CHARGE.

SHIPPED FROM: 10000 NW 15 TERRACE, MIAMI, FL 33172

ORIGINAL INVOICE

BY RECEIVING DELIVERY OF THE ITEMS COVERED BY THIS INVOICE, BUYER AGREES TO THE TERMS AND CONDITIONS OF SALE AT:
www.beconsumables.com/cm/docs/BE_CM_Conditions_of_Sale.pdf

BY RECEIVING DELIVERY OF THE ITEMS COVERED BY THIS INVOICE, BUYER AGREES TO THE TERMS AND CONDITIONS OF SALE AT:
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CONSUMABLES MANAGEMENT

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PAGE 1

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002409
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1270 ABERDEEN ST
HAWKESBURY, ON
CANADA K6A 1K7

ORDER NO.		DATE	SHIP VIA	TERMS		SHIPPING TERMS	
PO24366		05/28/14	FEDX INTL P1 COLL	NET 45		FOB-MIAMI	
ITEM NO.	QUANTITY ORDERED	PART NUMBER AND DESCRIPTION	PRICE	UNIT	BACK ORDER	SHIPPED	AMOUNT
1	10	MS17985C410 ✓ Description PIN ECCN :9A991 MFR: AVIBANK MFG. CTRL#: 2014C05649 LOT#: 1402728 LOT QTY: 10 Country of Origin USA	15.000	EA	0	10	150.0
2	50	MS21920-24 ✓ Description CLAMP ECCN :9A991 MFR: VOSS INDUSTRIES INC CTRL#: 2014D18032 LOT#: 171849 LOT QTY: 50 Country of Origin USA	11.170	EA	0	50	558.5
3	300	FE-832EF ✓ Description NUT MFR: PENN ENG & MFG. CTRL#: 2011K17746 LOT#: 967516 LOT QTY: 300 Country of Origin USA <i>These commodities, technology or software were exported from the United States in accordance with the Export Administration Regulations. Diversion contrary to U.S. law is prohibited.</i>	0.650	EA	0	300	195.0
CONTINUED							
MATERIAL TO BE RETURNED MUST HAVE PRIOR AUTHORIZATION BY B/E AEROSPACE							

ALL ITEMS ARE SUBJECT TO A 100% RESTOCKING CHARGE.

SHIPPED FROM: 10000 NW 15 TERRACE, MIAMI, FL 33172

MATERIAL CERTIFICATION: B/E AEROSPACE, INC. ("B/E AEROSPACE") WARRANTS THAT THE ITEMS SUBJECT OF THIS INVOICE WILL BE FREE FROM DEFECTS OF MATERIAL AND WORKMANSHIP AND, AS SET FORTH ON THE MATERIAL CERTIFICATION FORM ACCOMPANYING THE ITEMS SUBJECT OF THIS INVOICE, ARE IN CONFORMITY WITH ALL CURRENT GOVERNMENT REQUIREMENTS AND THE SPECIFICATIONS OF THE RESPECTIVE MANUFACTURERS. B/E AEROSPACE DISCLAIMS ALL OTHER WARRANTIES, EXPRESS OR IMPLIED, INCLUDING ALL WARRANTIES OF MERCHANTABILITY AND OF FITNESS FOR A PARTICULAR PURPOSE. THE LIABILITY OF B/E AEROSPACE IS EXPRESSLY LIMITED EXCLUSIVELY TO REPLACEMENT OF ANY ITEM WHICH IS REJECTED BECAUSE OF A DEFECT IN MATERIAL OR WORKMANSHIP SUCH REPLACEMENT SHALL CONSTITUTE SATISFACTION OF ALL LIABILITY B/E AEROSPACE MAY HAVE IN CONNECTION WITH SUCH ITEM, WHETHER LIABILITY IS BASED UPON CONTRACT RIGHTS, NEGLIGENCE, OR OTHERWISE, AND IN NO EVENT SHALL B/E AEROSPACE BE LIABLE FOR SPECIAL, INDIRECT OR CONSEQUENTIAL DAMAGES. FURTHER, B/E AEROSPACE MUST BE NOTIFIED OF A REJECTION OF AN ITEM WITHIN 30 DAYS AFTER RECEIPT BY THE CUSTOMER.



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Vice President of Quality

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B/E Aerospace, Inc.

CONSUMABLES MANAGEMENT

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INVOICE NUMBER

HTN02A

PAGE 2




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002409
DART AEROSPACE LTD
1270 ABERDEEN ST
HAWKESBURY, ON
CANADA K6A 1K7



SHIP TO:

DART AEROSPACE LTD
1270 ABERDEEN ST
HAWKESBURY, ON
CANADA K6A 1K7

ORDER NO.		DATE	SHIP VIA	TERMS		SHIPPING TERMS		
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ITEM NO.	QUANTITY ORDERED	PART NUMBER AND DESCRIPTION		PRICE	UNIT	BACK ORDER	SHIPPED	AMOUNT
		*** SHIPPED 1 CTN *** # 1=CTN 7# 0 OZ. 607561243461 FREIGHT ACCT# 15179324-0						
INVOICE#.....		HTN02A						
ORDER#.....		92WMF5						
CONSOLIDATE#..		1ASRWM						

MATERIAL TO BE RETURNED MUST HAVE PRIOR AUTHORIZATION BY B/E AEROSPACE

ALL ITEMS ARE SUBJECT TO A 100% RESTOCKING CHARGE.

SHIPPED FROM: 10000 NW 15 TERRACE, MIAMI, FL 33172

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PACKING SLIP

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www.beconsumables.com/cm/docs/BE_CM_Conditions_of_Sale.pdf



B/E Aerospace, Inc.

CONSUMABLES MANAGEMENT

Tel: +1.305.925.2600 • Fax: +1.305.507.7191 • www.beconsumables.com

Remit to Address: 88289 Expedite Way, Chicago, IL 60695-0001

Wire Instructions: B/E Aerospace Consumables Management • JPMorgan Chase Bank New York
ABA: 021000021 • Account: 304639273 • SWIFT: CHASUS33 • CHIP UID: 0002



CONSOLIDATION

1ASRWM

PAGE 1

SEND TO ACCOUNTING
SOLD TO:
002409

DART AEROSPACE LTD
1270 ABERDEEN ST
HAWKESBURY, ON
CANADA K6A 1K7

SHIP TO:

DART AEROSPACE LTD
1270 ABERDEEN ST
HAWKESBURY, ON
CANADA K6A 1K7



ORDER NO.		DATE	SHIP VIA	TERMS		SHIPPING TERMS		
See Below		05/28/2014	FEDX INTL P1 COLL	NET 45		FOB-MIAMI		
ITEM NO.	QUANTITY ORDERED	PART NUMBER AND DESCRIPTION		PRICE	UNIT	BACK ORDER	SHIPPED	AMOUNT
1		INVOICE# CUST P/O						
		FED. TAX# 06-120-9796						
		HTN02A PO24366						
byr		***CONSOLIDATION SUMMARY PAGE ONLY						
		SHIPPED ON 05/28/2014						
MATERIAL TO BE RETURNED MUST HAVE PRIOR AUTHORIZATION BY B/E AEROSPACE								

MATERIAL TO BE RETURNED MUST HAVE PRIOR AUTHORIZATION BY B/E AEROSPACE

ALL ITEMS ARE SUBJECT TO A 100% RESTOCKING CHARGE

PACKING SLIP

BY RECEIVING DELIVERY OF THE ITEMS COVERED BY THIS PACKING SLIP, BUYER AGREES TO THE TERMS AND CONDITIONS OF SALE AT:
www.beconsumables.com/cm/docs/BE_CM_Conditions_of_Sale.pdf



1. Vendor (Name and Address)/Vendeur (Nom et adresse) B/E Aerospace Consumables Management P.O. Box 025263 Miami, FL 33102-5263		2. Date of Direct Shipment to Canada/Date d'expédition directe vers la Canada 05/28/2014	
4. Consignee (Name and Address)/Destinataire (Nom et adresse) DART AEROSPACE LTD 1270 ABERDEEN ST HAWKESBURY, ON CANADA K6A 1K7		5. Purchaser's Name and Address (If other than Consignee) Nom et adresse de l'acheteur (S'il diffère du destinataire) DART AEROSPACE LTD 1270 ABERDEEN ST HAWKESBURY, ON CANADA K6A 1K7	
8. Transportation: Give Mode and Place of Direct Shipment to Canada Transport: Préciser mode et point d'expédition directe vers la Canada FEDX INTL P1 COLL		9. Conditions of Sales and Terms of Payment (i.e. Sale, Consignment Shipment, Leased Goods, etc.) Conditions de vente et modalités de paiement (p. ex. vente, expédition en consignation, location de marchandises, etc.) NET 45	
10. Currency of Settlement/Devises du paiement U.S. Currency		6. Country of Transshipment/Pays de transbordement CANADA	
7. Country of Origin of Goods Pays d'origine des marchandises USA		IF SHIPMENT INCLUDES GOODS OF DIFFERENT ORIGIN ENTER ORIGINS AGAINST ITEMS IN 12 SI L'EXPÉDITION COMPREND DES MARCHANDISES D'ORIGINES DIFFÉRENTES, PRÉCISER LEUR PROVENANCE EN 12	
11. No. of Pkgs Nbre de colis 1	12. Specification of Commodities (Kind of Packages, Marks and Numbers, General) Description and Characteristics, i.e. Grade, Quality Désignation des articles (Nature des colis, marques et numéros, description générale et caractéristiques, p. ex. classe, qualité) PO#: PO24366 MS17985C410 MS21920-24 FE-832EF Invoice#: HTN02A PIN CLAMP NUT	13. Quantity (State Unit) Quantité (Préciser l'unité) 10 50 300	14. Unit Price Prix unitaire 15.000 /EA 11.170 /EA 0.650 /EA
15. Total 150.00 558.50 195.00		16. Selling Price/Prix de vente U.S. Currency	
18. If any of fields 1 to 17 are included on an attached commercial invoice, check this box. Si les renseignements des zones 1 à 17 figurent sur la facture commerciale, cocher cette boîte. <input checked="" type="checkbox"/> Commercial Invoice No./N° de la facture commerciale		17. Invoice Total Total de la facture 903.50	
19. Exporter's Name and Address (if other than Vendor) Nom et adresse de l'exportateur (S'il diffère du vendeur) B/E Aerospace Consumables Management 10000 NW 15 TERRACE MIAMI, FL 33172		20. Originator (Name and Address)/Expéditeur d'origine (Nom et adresse) Office Manager	
21. Departmental Ruling (if applicable)/Décision du Ministère (S'il y a lieu)		22. If fields 23 to 25 are not applicable, check this box Si les zones 23 à 25 sont sans objet, cocher cette boîte <input checked="" type="checkbox"/>	
23. If included in field 17 indicate amount: Si compris dans le total à la zone 17, préciser: (i) Transportation charges, expenses and insurance from the place of direct shipment to Canada Les frais de transport, dépenses et assurances à partir du point d'expédition directe vers le Canada \$ _____ (ii) Costs for construction, erection and assembly incurred after importation into Canada Les coûts de construction, d'érection et d'assemblage après importation au Canada \$ _____ (iii) Export packing Le coût de l'emballage d'exportation \$ _____		24. If not included in field 17 indicate amount: Si non compris dans le total à la zone 17, préciser: (i) Transportation charges, expenses and insurance to the place of direct shipment to Canada Les frais de transport, dépenses et assurances jusqu'au point d'expédition directe vers le Canada \$ _____ (ii) Amounts for commissions other than buying commissions Les commissions autres que celles versées pour l'achat \$ _____ (iii) Export packing Le coût de l'emballage d'exportation \$ _____	
25. Check (if applicable) Cocher (S'il y a lieu): (i) Royalty payments or subsequent proceeds are paid or payable by the purchaser De redevances ou produits ont été ou seront versés par l'acheteur <input type="checkbox"/> (ii) The purchaser has supplied goods or services for use in the production of these goods L'acheteur a fourni des marchandises ou des services pour la production des marchandises <input type="checkbox"/>			